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CONFIRMATION NO. 1323

<b>SERIAL NUMBER</b> 10/517,849	<b>FILING OR 371(c) DATE</b> 07/22/2005 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1615	<b>ATTORNEY DOCKET NO.</b> R00957US (#90568)	
<b>APPLICANTS</b> Werner Wessling, Rengsdorf, GERMANY;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP03/04807 05/08/2003					
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 102 26 494.5 06/14/2002					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 11/22/2005					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>[Signature]</u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 32	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> D Peter Hochberg Company The Baker Building 6th Floor 1940 East 6th Street Cleveland, OH44114-2294					
<b>TITLE</b> Film-Shaped Mucoadhesive Administration Forms For Administering Cannabis Agents					
<b>FILING FEE RECEIVED</b> 2230	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		